

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	1						51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59	1				
10							60					
11							61					
12							62					
13							63					
14							64					
15							65	1				
16	1						66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29							79					
30	1						80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41		1					91					
42							92					
43							93					
44							94					
45	1						95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	15		↓		↓		TOTAL IND.		↓		↓	
TOTAL DEP.	60	←	↓	←	↓	←	TOTAL DEP.		←	↓	←	↓
TOTAL CLAIMS	65						TOTAL CLAIMS					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS